

**UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF ALABAMA**

HUNTER CREGER, individually and on  
behalf of all others similarly situated, *et al.*

*Plaintiffs,*

v.

UNITED LAUNCH ALLIANCE, LLC;

*Defendant.*

Civil Action No.:

**AFFIDAVIT OF SHERRIE MAINE**

I, Sherrie Maine, declare as follows:

1. I am 61 years of age and I am a resident of Madison, Alabama.
2. I began my employment with United Launch Alliance in 05/2007 as a production technician and was promoted to quality inspector in 12/2009. I regularly receive positive accolades from my managers and peers. My current base salary is \$83,200 and with overtime my yearly income 2020 was \$100,742.
3. As a quality inspector assigned to the Atlas upperstage, my principal work consists of the inspection of the Centaur III, the proper documentation of the builds, and documenting non-conformances. My desk is located on the spacious manufacturing floor and segregated from others by a distance greater than 6 feet. My assignments are 50% desk work and 50% hardware inspections.
4. As a quality inspector there is a minimal chance that I would be required to travel to other United Launch Alliance locations or federal facilities. In the off-chance that would occur, there are several other inspectors, having the same qualifications as I, that are vaccinated.
5. For the past year and a half since the COVID pandemic began, I have done my work as a quality inspector at ULA while working with mask and social distance restrictions and submitting to temperature checks. I have also been tested for COVID in the past and I could undertake regular COVID testing if necessary.
6. On August 25, 2021, ULA's President and CEO, Tony Bruno, announced in an email to "All ULA Teammates" that "ULA will require the COVID vaccination as a condition of employment beginning Sept. 1, 2021."

7. On August 19, 2021, ULA communicated their commitment to bargaining in good faith with our union “...we also recognize this decision, and how it will apply to IAM-represented teammates, is subject to bargaining. We fully intend to negotiate in good faith bargaining with the IAM over the effects of this decision. We made this commitment to union leadership before this policy announcement was released and have already asked for the union’s availability to meet and bargain.” This correspondence gave me hope that a resolution would be reached concerning the unvaccinated and that I would be able to continue my employment at ULA with accommodations.

8. On September 1, 2021, ULA announced new policy CPS-086, which “requires all employees and contractors with badged, unescorted access to ULA facilities to be vaccinated against COVID-19 as part of its continued efforts to maintain a safe workplace.”

9. In its HR-527, ULA COVID Vaccination Process Instruction issued that same day, ULA announced that “Effective October 1, 2021, ULA will begin requiring all employees to be vaccinated against COVID-19 as a condition of employment.”

10. The Instructions further provided that “Those employees or On-Site Contractors who are not already fully vaccinated will need to receive the first dose of the Pfizer or Moderna vaccine, or the single dose of the Johnson & Johnson vaccine, by October 29, 2021. They will need to receive the second dose of the Pfizer or Moderna vaccine by November 30, 2021.”

11. On September 7, 2021, ULA’s President and CEO, Tony Bruno, gave a video presentation in which he announced that ULA would be implementing a vaccine mandate but specifically informed ULA employees that they would be eligible for exemption based on sincerely-held religious beliefs and medical situations, including having a positive serology test confirming antibodies from a prior COVID infection. I received a link to that video presentation on September 22, 2021, by email.

12. In October 2021, I submitted a request for a medical exemption based on having natural antibodies. At the time, ULA was accepting positive serology tests as a medical exemption. A true and correct copy of that medical exemption request is attached hereto as Exhibit A.

13. On October 20 2021, I received an email from Waynett Boyd, ULA Medical Leader, that my request for Medical Exemption based on positive antibody level has been denied. Although the denial was sent on Oct. 18, I was out of office until Oct 20 which was the first opportunity I had to be in receipt of the denial. A true and correct copy of that denial is attached hereto as Exhibit B.

14. ULA advised me that it would deem me to have “voluntarily resigned” if I did not receive the first dose (or, in the case of a single-dose vaccine, the only dose) of an approved Covid-19 vaccine by Friday, October 29, 2021. Following the denial of my medical exemption, I submitted a request for religious accommodation on October 27, 2021. A true and correct copy of that religious accommodation request is attached hereto as Exhibit C.

15. Later that same day on October 27, 2021, I received a reply notifying me that my religious accommodation request was denied as untimely, on the ground that ULA “will not be conducting any additional interactive meetings.”

16. On October 29, 2021, I filed an appeal of the denial of my religious and medical accommodation request, utilizing the union grievance process.

17. I am a committed Christian, and my sincerely-held religious beliefs bar me from taking a vaccine that was manufactured and/or tested on cell lines derived from stem cells of aborted fetuses, as all of the currently available Covid-19 vaccines are. Accordingly, and as I advised ULA, I cannot in good conscience comply with the vaccine mandate that has unilaterally been imposed by ULA as a condition on my employment.

18. On Oct 28, 2021, I filed with the Equal Employment Opportunity Commission a charge against ULA for religious discrimination on the basis of ULA’s denial of my request for religious accommodation. A true and correct copy of that EEOC charge is attached hereto as Exhibit D.

19. EEOC notified me that my initial interview would be held on February 10, 2022. A true and correct copy of that notification is attached hereto as Exhibit E.

20. Being close to retirement age, I had aspired to complete my extensive aerospace career at United Launch Alliance. At my age, new employment will be difficult to find in my area of expertise. A comparable compensation would be improbable as over the 14+ years dedicated to ULA, I have grown into top compensatory range.

21. Being one of the main sources of financial support for my family, this decrease in pay will substantially affect our ability to meet our financial goals. My husband has chronic medical conditions of which he is eligible for permanent disability. He has been trying to remain employed as long as possible, however, the stress we are under taking due to my job loss has increased the number of physical episodes he is incurring. We were also counting on my medical insurance once he begins Disability requests until they are approved and Medicare option is available..

22. Without employment on regular income, my ability to provide for my family will be severely strained, preventing me from fulfilling another duty imposed upon me by my religious faith, namely, the duty to provide for my family, as specified in 1 Timothy, Chapter 5, verse 8: “But if anyone does not provide for his relatives, and especially for members of his household, he has denied the faith and is worse than an unbeliever.”

I declare under penalty of perjury that the foregoing is true and correct.

\_November 10, 2021\_\_\_\_\_  
Date

**Sherrie Maine**  
\_\_\_\_\_  
Sherrie K. Maine

## **EXHIBIT A**

From: Judy Sexton jas739@msn.com  
 Subject: Scans  
 Date: November 10, 2021 at 7:10 AM  
 To: Sherrie Maine skmaine@gmail.com

M

Sent from Outlook

**COVID-19 VACCINATION MEDICAL ACCOMMODATION FORM**  
**(NON-CALIFORNIA)**

PLEASE PRINT THE FOLLOWING INFORMATION:

Name: Sherrie Maine Phone No.: 256-432-1561  
 E-mail: Sherrie.Maine@ula.launch.com Supervisor/Leader: Leslie Newbree

I understand that United Launch Alliance ("ULA") is requiring that employees comply with its mandatory vaccination policy as part of its ongoing efforts to maintain a safe work environment. I am requesting an accommodation allowing me to come into the workplace even though I am not fully vaccinated against COVID-19 because of a medical condition, a disability concern, or a positive serology test. If my medical condition changes and I am able to have the vaccination in the future, I understand I must notify my Human Resources Business Partner.

I acknowledge that I have read and fully understand the above information on this form.

Sherrie Maine 10/01/2021  
 Employee Signature Date

**HEALTHCARE PROVIDER SECTION<sup>1</sup>**

The employee's Healthcare Provider should review the following information and respond fully to the questions below:

At this time, ULA requires employees to receive the COVID-19 vaccination in order to enter the workplace. Employee has requested an accommodation due to a medical condition, a disability concern, or a positive serology test and asks to be permitted to work in the workplace even though they are unvaccinated.

We ask that you complete this form so that we can assess the employee's request and determine whether we can reasonably accommodate the employee without posing a significant risk of substantial harm to the health or safety of the employee or others. Please only provide information related to the condition(s) that support or are related to the employee's request for accommodation. Should you have any questions, please contact ULA at [ula\\_medical@ulalaunch.com](mailto:ula_medical@ulalaunch.com). Thank you.

1. Does the employee have a physical or mental condition that precludes the employee from receiving one of the COVID-19 vaccines? (If you answer "no" to this question, you do not need to answer questions 2 to 6. Please proceed to question 7.)

Yes ☐ No ☒

<sup>1</sup> A Note to Health Care Providers Assisting Our Employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, you should not gather or provide any genetic information when responding to this request for medical information. "Genetic information" as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.



1

Form HR-527B Rev 1 (24 September 2021)  
Copyright© 2021 United Launch Alliance, LLC as an unpublished work. All rights reserved

2. Is there a COVID-19 vaccine currently approved in the United States (including those approved through the Emergency Use Authorization process) that the employee could safely receive?

Yes \_\_\_ No \_\_\_

3. Does the employee's physical or mental condition that precludes the employee from receiving any of the available COVID-19 vaccines substantially limit one or more major life activities? (In this context, "substantially limit" means to make achievement of the major life activity difficult. Whether achievement of the major life activity is "difficult" is an individualized assessment which may consider what most people in the general population can perform with little or no difficulty, what members of the individual's peer group can perform with little or no difficulty, and/or what the individual would be able to perform with little or no difficulty in the absence of disability. Please answer this question without consideration of any mitigating measures.)

Yes \_\_\_ No X

4. If the employee's condition that precludes the employee from receiving a COVID-19 vaccine is temporary, state how long the limitation is expected to continue.

\_\_\_\_\_ Days/Weeks/Months

\_\_\_\_\_ Employee's condition is indefinite.

N/A

5. Please provide any details that, in your medical opinion, support the exemption to ULA's mandatory COVID-19 vaccination policy. (Attach additional sheets if necessary.)

Patient declines vaccine based on her  
having natural immunity with  
antibodies on recent lab work

6. Are there any reasonable accommodations of which you are aware that would enable the unvaccinated employee to perform their job duties on-site without posing a direct threat to the health or safety of the employee or others? If so, please specify the reasonable accommodation and why you believe it will be effective.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

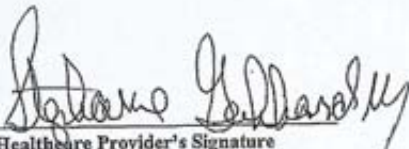
7. Has the unvaccinated employee received a positive FDA-approved (including Emergency Use Authorization) SARS-CoV-2 antibody (serology) test?

Yes X No \_\_\_

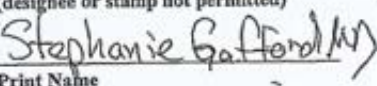
If yes, please specify the date of the positive test and attach a copy of the serology report. 9/23/2021

2

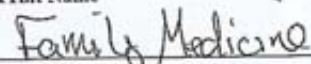
Form HR-527B Rev 1 (24 September 2021)  
Copyright© 2021 United Launch Alliance, LLC as an unpublished work. All rights reserved



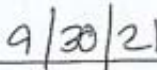
Healthcare Provider's Signature  
(designee or stamp not permitted)



Print Name



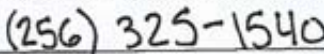
Area of Practice Specialty



Date

  
1041 BALCH ROAD, STE 300  
MADISON, AL 35758

Name and Address of Provider's Practice



Phone Number

## Huntsville Hospital Laboratory Services

PAGE  
1

101 Sivley Road, Huntsville, AL 35801 Phone ( 256) 265-2522, Fax: (256) 265-6231

PATIENT NAME <b>MAINE, SHERRIE KAY</b>		PATIENT ID <b>01812074</b>	DOB <b>04/21/1960</b>	AGE <b>61 Y</b>	SEX <b>F</b>	STATUS <b>Final</b>	DESTINATION <b>IFC</b>
ORDERING PROVIDER <b>BAND, KATHLEEN G</b>		COLLECT DATE & TIME <b>09/23/2021 06:07</b>	DATE OF SERVICE <b>09/23/2021 12:17</b>		PATIENT'S PHONE # <b>2674710806</b>		
CHART NUMBER	REGISTRATION NO. <b>IFC.8310</b>	Report Comment					

COMMENTS H405657:CBGD, CMP, COVAS, LIPPR, VITDOH

Diagnostic Procedure	Result		Units	Reference Range
	In Range	Out of Range		
SARS-CoV-2 SPIKE ANTIBODY	128.00	H	U/mL	<0.80
<p>Results suggest recent or prior infection with SARS-CoV-2 and/or vaccination. It is not known at this time if the presence of antibodies to SARS-CoV-2 confers immunity to reinfection.</p> <p>Patient could be a potential convalescent plasma donor.</p>				
INTERPRETATION	<p>Interpretation of patient results:</p> <p>Result Interpretation</p> <p>&lt;0.80 U/mL Negative for anti-SARS-CoV-2-S</p> <p>≥ 0.80 U/mL Positive for anti-SARS-CoV-2-S, numeric value within measuring interval</p>			
COMMENT	<p>Testing was performed using the Roche Diagnostics Elecsys Anti-SARS-CoV-2 S Immunoassay. Fact Sheets for this Emergency Use Authorization (EUA) assay can be found at the following links:</p> <p>For Healthcare Providers:</p> <p><a href="https://www.fda.gov/media/144035/download">https://www.fda.gov/media/144035/download</a></p> <p>For Recipients:</p> <p><a href="https://www.fda.gov/media/144036/download">https://www.fda.gov/media/144036/download</a></p>			
LIPID PANEL TRIGLYCERIDE	79		mg/dL	<150

Continued on next page

MAINE, SHERRIE KAY

PRINTED: 09/23/2021 15:41

IFC



## **EXHIBIT B**

**From:** Boyd, Waynett S <Waynett.S.Boyd@ulalaunch.com> **Sent:** Monday, October 18, 2021 1:21 PM **Subject:** Vaccine Exemption/ Reasonable Accommodation Request--SARS COV-2 Serology (Antibody Level)

**Sensitive Internal Information**

Hello,

Your request for a Vaccine Medical Exemption/ Accommodation based on a positive SARS-COV-2 antibody level has been denied. This decision was based on the non-acceptance of serology levels as substitution for COVID-19 vaccinations by our federal government customer. For additional information regarding the customer and their requirements, please see the ULA Leadership communications dated October 9. 2021.

If your personal medical provider included a medical condition on your Exemption/ Accommodation request, your request is still under review. You will be contacted if additional medical information is required.

Sincerely,

*Waynett*

**Waynett S. Boyd, DNP, RN, COHN-S/CM, CWCP, NE-BC**

ULA Medical Leader

Desk: 256-432-1265


Cell: 256-221-2192

Toll free: 866-520-1268

Toll free fax: 888-316-1613

[waynett.s.boyd@ulalaunch.com](mailto:waynett.s.boyd@ulalaunch.com)

*“Ownership Is The Heart Of Performance”*

 This message is intended only for the use of the intended recipient. If you are not an intended recipient, you are hereby notified that any use, dissemination, disclosure or copying of this communication is strictly prohibited. If you have received this communication in error please destroy all copies of this message and its attachments and notify the sender immediately.

## **EXHIBIT C**

**From:** Maine, Sherrie K <sup>[SEP]</sup>**Sent:** Wednesday, October 27, 2021 11:54 AM<sup>[SEP]</sup>**To:** Bradley, Lourie A <lourie.a.bradley@ulalaunch.com><sup>[SEP]</sup>**Cc:** Michael, Anthony W <anthony.w.michael@ulalaunch.com><sup>[SEP]</sup>**Subject:** Religious Exemption Request

Lourie,  
Attached is a request to be exempted from the Covid Vaccine requirement.  
As a condition of employment, ULA has mandated that we all receive the vaccine. The vaccine creates antibodies so as not to catch and/or spread the SARS-2 virus.  
However, the controversy of the vaccine using aborted fetal cells is in contradiction to the sanctity of life in itself.

As a footnote, I have already had SARS-2 and have antibodies as proved with my serology test and therefore not a burden to the ULA community.

Thank you,

Sherrie Maine

United Launch Alliance  
Quality Inspector  
Decatur Operations  
[Sherrie.k.maine@ulalaunch.com](mailto:Sherrie.k.maine@ulalaunch.com)

This message is intended only for the use of the intended recipient. If you are not an intended recipient, you are hereby notified that any use, dissemination, disclosure or copying of this communication is strictly prohibited. If you have received this communication in error please destroy all copies of this message and its attachments and notify the sender immediately.



HR Business Partner  
United Launch Alliance, Inc.  
1001 Red Hat Road  
Decatur, Alabama 35601

Re: Request for Religious Exemption from Vaccination  
Policy

Dear Sir or Madam:

I am requesting a religious exemption from the Covid 19 Vaccination policy, specifically, that I not be required to take the vaccine.

My personal religious belief prevents me from being able to take any of the available COVID-19 vaccines because, in one way or another, they all employ cell lines derived from aborted children, and my personal religious conviction compels me to abstain from any cooperation, direct or indirect, in abortion, which I view as the killing of innocents<sup>1</sup>.

<sup>1</sup> Included but not limited to the following vaccines:

Johnson & Johnson/Janssen: Fetal cell cultures are used to produce and manufacture the J&J COVID-19 vaccine and the final formulation

Pfizer/BioNTech: The HEK-293 abortion-related cell line was used in research related to the development of the Pfizer COVID-19 vaccine.

Moderna/NIAID: Aborted fetal cell lines were used in both the development and testing of Moderna's COVID-19 vaccine.

<sup>2</sup> See "Note on the morality of using some anti-Covid-19 vaccines," CONGREGATION FOR THE DOCTRINE OF THE FAITH, December 21, 2020: [https://www.vatican.va/roman\\_curia/congregations/cfaith/documents/rc\\_con\\_cfaith\\_doc\\_20201221\\_nota-vaccini-anticovid\\_en.html](https://www.vatican.va/roman_curia/congregations/cfaith/documents/rc_con_cfaith_doc_20201221_nota-vaccini-anticovid_en.html) (accessed August 17, 2021).

<sup>3</sup> See <https://www.livefatima.io/>: The crime of abortion is so monstrous that any kind of concatenation with this crime, even a very remote one, is immoral and cannot be accepted under any circumstances by a Catholic once he has become fully aware of it. One who uses these vaccines must realize that his body is benefitting from the "fruits" (although steps removed through a series of chemical processes) of one of mankind's greatest crimes. Any link to the abortion process, even the most remote and implicit, will cast a shadow over the Church's duty to bear unwavering witness to the truth that abortion must be utterly rejected. The ends cannot justify the means. See also affidavit of membership in the Confraternity of Our Lady of Fatima.

It is my belief that all life is created in God's image and according to His plan. To take the life of one of his precious creations is a form of human sacrifice.

I do not wish to condone the practice of this sacrilegious service.

Please accept my Religious Exemption Request.

Thank you,  
Sherrie Maine

## **EXHIBIT D**

## **EEOC (INQUIRY) NUMBER: 420-2022-00246**

### **Inquiry Information**

#### **REASON(S) FOR CLAIM**

**Date of Incident (Approximate):** 10/27/2021

**Reason for Complaint:** Religion

**Pay Disparity:**

**Location of Incident:** Alabama

**Submission (initial inquiry) Date:** 10/27/2021

**Claim previously filed as charge with EEOC?** No

**Approximate Date of Filing:** N/A

**Charge Number:** N/A

**Claim previously filed as complaint with another Agency?** No

**Agency Name:** N/A

**Approximate Date of Filing:** N/A

**Nature of Complaint:** N/A

#### **INQUIRY OFFICE**

**Receiving:** Birmingham District Office

**Accountable:** Birmingham District Office

#### **APPOINTMENT**

**Appointment Date and time:** 02/10/2022 01:00 PM US/Central

**Interview Type:** Phone

**APPROXIMATE DEADLINE FOR FILING A CHARGE:** 04/26/2022

#### **POTENTIAL CHARGING PARTY**

**First Name, Middle Initial:** Sherrie

**Last Name:** Maine

**Street or Mailing Address:** 102 Nestrack Drive

**Address Line 2:**

**City, State, Zip:** MADISON, AL, 35756

**Country:** UNITED STATES OF AMERICA

**Year of Birth:**

**Email Address:** skmaine@gmail.com

**Home Phone Number:**

**Cell Phone Number:** (267) 471-0808

**RESPONDENT/Employer**

**Organization Name:** UNITED LAUNCH ALLIANCE

**Type of Employer:** Business or non-profit organization that I applied to, work for, or worked for

**Number of Employees:** An uncertain number of employees

**Street or Mailing Address:** 1001 RED HAT RD NORTHWEST

**Address Line 2:**

**City, State, Zip Code:** DECATUR,AL, 35601

**County:** Morgan

**Phone Number:** (256) 432-1956

**RESPONDENT CONTACT**

**First and Last Name:** LOURIE BRADLEY

**Email Address:**

**Phone Number:**

**Title:** Human Resources Director or Owner

**LOCATION OF POTENTIAL CHARGING PARTY'S EMPLOYMENT**

**Street or Mailing Address:**

**Address Line 2:**

**City, State, Zip Code:**

**County:**

**POTENTIAL CHARGING PARTY'S DEMOGRAPHICS**

**Gender:** F

**Disabled:** I do not have a disability

**Are you Hispanic or Latino?** not hispanic or latino

**Ethnicity:** White,

**National Origin:** American(U.S.)

**Adverse Action(s)**

My employer will not accept request for Religious accommodation

**Supplemental Information**

**What Reason(s) were you given for the action taken against you?**

I requested a Religious Exemption to a policy requirement. The requirement was not enforced at the time of my hiring. The Religious Exemption request was denied to even be entertained by the HR department.

**Was anyone in a similar situation treated the same, better, or worse than you?**

Others had applied for an exemption and were denied. My request was not even considered to be heard.

**Please provide name(s) and email and/or phone number of anyone who will support your claim, and briefly describe the information this person will provide.**

Anthony Michael will confirm the request and denial as he was copied on the emails.  
Anthony Michael 256-762-7317

**Please tell us any other information about your experience?**

My non-compliance to this policy has cost me my job at United Launch Alliance if not remedied by Oct 29th, 2021. I have done nothing wrong to warrant being fired. I have been with the company almost 15 years with good standing. This requirement does not affect my ability to perform my job function.



## **EXHIBIT E**

From: noreply@eeoc.gov  
Subject: Notice of Scheduled Interview  
Date: October 28, 2021 at 4:16:43 AM CDT  
To: skmaine@gmail.com

You are scheduled for an interview by Phone with the Equal Employment Opportunity Commission (EEOC) regarding your inquiry **420-2022-00246**. This email confirms your appointment with an EEOC representative of the **Birmingham** office for **02/10/2022 at 01:00 PM CST**.

On the day of your interview, please have the password for your EEOC Public Portal user account with you

Before your interview, please visit [EEOC Public Portal](#) as soon as possible to provide additional information about your inquiry. Providing additional information is optional, but can help make the interview more productive and efficient. You may add or edit the additional information up until you have your interview with EEOC. The information you provide is confidential and will not be disclosed to your employer during an investigation.

**ANSWERING THESE QUESTIONS IS NOT THE SAME AS FILING A CHARGE OF DISCRIMINATION.**

A charge of discrimination is a signed statement asserting that an organization engaged in employment discrimination. It requests EEOC to take remedial action. The laws enforced by EEOC, except the Equal Pay Act, require you to [file a charge](#) before you can file a lawsuit for unlawful discrimination. There are strict [time limits](#) for filing a charge.

To change or cancel your appointment, please log into the [EEOC Public Portal](#) and select the Schedule an Interview option for your inquiry.

*Notice of Confidentiality: The information contained in this transmission may contain privileged and confidential information, including information protected by federal and state privacy laws. It is intended only for the use of the person(s) named above. If you are not the intended recipient, you are hereby notified that any review, dissemination, distribution, or duplication of this communication is strictly prohibited and may be unlawful. If you are not the intended recipient, please contact us at [digitalsupport@eeoc.gov](mailto:digitalsupport@eeoc.gov) and destroy all copies of the original message and attachments.*